

| POSITION            | INITIALS | ID NO. | DATE      |
|---------------------|----------|--------|-----------|
| FEE DETERMINATION   | NW       | 71534  | 6-8-11-98 |
| O.I.P.E. CLASSIFIER |          | 69300  |           |
| FORMALITY REVIEW    |          |        |           |

INDEX OF CLAIMS

..... Rejected  
 ..... Allowed  
 (Through numeral) Canceled  
 ..... Restricted  
 N ..... Non-elected  
 I ..... Interference  
 A ..... Appeal  
 O ..... Objected

| Claim | Final | Original | Date |
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If more than 150 claims or 10 actions  
staple additional sheet here

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